



2015 - 2016 Early Steps Program Annual Report

Rick Scott

December 1, 2016

Governor

Celeste Philip, MD, MPH

State Surgeon General and Secretary of Health

MISSION:

To protect, promote and improve the health of all people in Florida through integrated state, county and community efforts.

Submitted to:

The Honorable Rick Scott, Governor, State of Florida

The Honorable Joe Negron, President, Florida State Senate

The Honorable Richard Corcoran, Speaker, Florida State House of Representatives

Florida Interagency Coordinating Council for Infants and Toddlers



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Executive Summary

The Florida Department of Health (Department), Division of Children's Medical Services (CMS), Bureau of Early Steps and Newborn Screening is pleased to present this inaugural annual report assessing the performance of the Early Steps Program to the Governor, the President of the Senate, the Speaker of the House of Representatives and the Florida Interagency Coordinating Council for Infants and Toddlers, as required by section 391.308(5), Florida Statutes.

The Individuals with Disabilities Education Act (IDEA) is a federal law that provides children, including those with disabilities, with a free, appropriate public education. Part C of IDEA¹ provides for early intervention services for children under three years of age with a developmental disability, developmental delay or at-risk for delay. The Early Steps Program implements and administers Part C of the IDEA in Florida.

The Early Steps Program provides developmental evaluation; early intervention services; and training and support services in a variety of home and community settings. These services and supports enhance family and caregiver confidence and capacity to meet their child's developmental needs and desired outcomes. Some of the highlights of the program's performance include:

- Increased the number of infants and toddlers referred by 10 percent (from 43,753 in FY 2013-2014 to 48,194 in FY 2015-2016);
- Increased the number of infants and toddlers determined eligible and served with an IFSP by 13 percent (from 27,266 in FY 2013-2014 to 31,091 in FY 2015-2016);
- Improved social-emotional skills for 94 percent of infants and toddlers assessed upon exit from Early Steps (5,406 of 5,767 in FY 2015-2016);
- Improved cognitive skills for 96 percent of infants and toddlers assessed upon exit from Early Steps (5,546 of 5,793 in FY 2015-2016); and
- Maintained the percentage of families who reported that Early Steps helped them meet their child's developmental needs at 91 percent (603 of 663 families in FY 2015-16).



¹ Individuals with Disabilities Education Act, 34 C.F.R. § 303 (2016).

Background

Positive early learning experiences are crucial for later success in school, the workplace and the community. Early intervention services positively impact outcomes across children's developmental domains: physical, cognitive, communication, social or emotional and adaptive. Families benefit from early intervention by being able to better meet their children's needs and enhance their unique abilities from an early age. Early intervention services also benefit the community and society, for example, by lowering the costs of special education and social welfare programs.

Legislative History

Congress initially passed IDEA in 1975, placing the program in the U.S. Department of Education (U.S. DOE). The law was amended in October 1986, establishing Part C in recognition of "an urgent and substantial need" to:

- Enhance the development of infants and toddlers with disabilities;
- Reduce educational costs by minimizing the need for special education through early intervention;
- Minimize the likelihood of institutionalization and maximize independent living; and
- Enhance the capacity of families to meet their child's needs.

Florida implemented Part C of the IDEA in September 1993. In 2016, Florida law was amended providing a comprehensive framework for the operation and administration of the Early Steps Program. Some of the changes include specifying eligibility criteria, requiring an annual report, a state plan and renaming the program Early Steps.

Program Overview

The Early Steps Program serves infants and toddlers under three years of age, who have developmental delays or an established condition likely to result in a developmental delay, in communities where children live, learn and play. Examples of conditions that children who are served in this program have include autism spectrum disorder, cerebral palsy, Down syndrome, deafness and hard of hearing and visual impairment.



The Early Steps Program:

- Identifies infants and toddlers potentially eligible under Part C of the IDEA; completes an assessment of each eligible child's skills and abilities;
- Creates an Individualized Family Support Plan (IFSP) based on the developmental needs of the infant or toddler, concerns, priorities, resources and desired outcomes of the family;
- Coordinates the provision of early intervention services and supports with the family which involves the family and caregivers' interaction with the child throughout the day; and
- Provides a service coordinator to assist families in gaining access to a variety of services and supports, such as early intervention sessions, vision/hearing services, assistive technology, family training and other developmental interventions.

The Early Steps Program uses a team-based approach with each family which includes a team lead to allow for a cohesive, consistent group to support the child and family. The team uses coaching strategies to help family members and caregivers develop the skills needed to support child development, in addition to ensuring family members and caregivers are fully supported to address the child's functional needs.

Funding

U.S. DOE provides grant funding annually to states for the implementation of Part C of the IDEA. Funds are allocated based on each state's number of children from birth through age two as a proportion of the nationwide child population. Federal regulations require Part C of the IDEA funds be used as the payer of last resort.

The Early Steps Program remains in compliance with the Part C of the IDEA maintenance of effort requirement, meaning Florida's annual budget must be at least equal to the amount of state funds expended for early intervention services for the preceding fiscal year (FY). The Early Steps Program is responsible for the state match for Medicaid Early Intervention Services, which is part of the Early Steps annual budget included in the General Appropriations Act (GAA). Figure 1 shows the current year's funding and the annual funding trend for the three preceding fiscal years. The federal amounts are based on the actual grant awards.



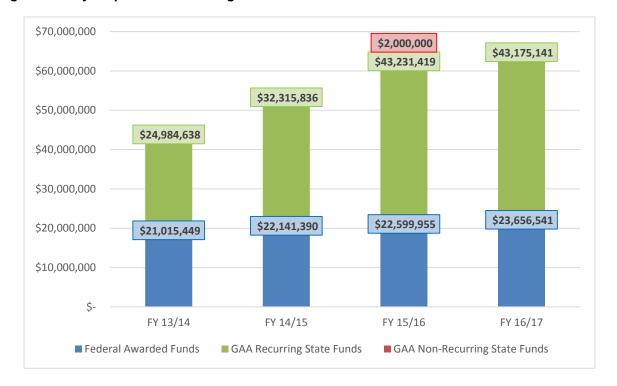


Figure 1. Early Steps Annual Funding

Federal and state funds have increased from FY 2013-2014 through FY 2016-2017 resulting in a total increase of 37 percent. Federal funds have increased by 12 percent from FY 2013-2014 through FY 2016-2017. Recurring state funds have increased by 53 percent from FY 2013-2014 through FY 2016-2017.

Early Steps funds support:

- State office (lead agency) administrative positions;
- Major activities to be carried out in maintaining and implementing the statewide system
 of early intervention services that can include enhancing the Comprehensive System of
 Personnel Development, a data system, public awareness and ensuring a timely,
 comprehensive, multidisciplinary evaluation for each child;
- Administrative personnel and support for the state's advisory council;
- Direct early intervention services for eligible children and their families; and
- Other state or local public agencies, as appropriate.



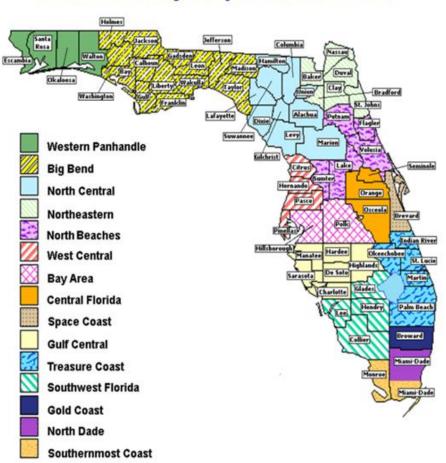
Program Structure

The Department is the lead agency responsible for program oversight, which includes, but is not limited to, administrative functions; federal reporting; federal grant management; fiscal accountability; and monitoring contract compliance. The Department maintains a statewide interagency coordinating council called the Florida Interagency Coordinating Council for Infants and Toddlers (FICCIT). The role of FICCIT is to advise and assist Florida's Early Steps Program in the performance of its responsibilities.

The Early Steps Program is administered throughout the state in 15 geographic regions through contracts with 14 organizations as demonstrated in Figure 2.

Figure 2. Early Steps Geographic Regions

Florida's Early Steps Service Areas





The Local Early Steps programs are the contracted entities responsible for service provision which includes evaluations for children referred for eligibility; assessments for intervention planning; coordination of services; delivery of early intervention services by working with internal and community service providers and other community resources; and transition when the child leaves the program. Figure 3 is an overview of the functions of the Local Early Steps programs.

Figure 3. Local Early Steps' Program Functions²

Step 1: Referral

- Hospitals
- Physicians
- Parents
- ·Child care programs

Step 2: Screening & First Contacts

- •Initial contact within 5 days
- Gather information
- Identify family concerns
- Screening, if necessary

Step 3: Evaluation

- Conducted by multidisciplinary team
- Standardized evaluation
- •Review of medical, education and other records

Step 4: Assessment and IFSP Planning

- Assessment identifies child's unique strengths/needs
- IFSP identifies authorized services

Step 5: Service Provision

- Services must begin within 30 days of IFSP development
- · Services provided where children live, learn and play.

Step 6: IFSP Review

- •Reviewed at least every 6 months
- Meet face-to-face on at least annual basis
- •Re-determine eligibility
- Assess the outcomes, strategies and services

Step 7: Transition

- •90 days before 3rd birthday
- •Transition plan is part of the IFSP
- •Transition plan outlines activities, referrals and any additional family concerns

² Table adapted from a version outlined in <u>Office of Program Policy Analysis & Government Accountability (OPPAGA)</u> <u>Research Memorandum, Florida's Early Steps Program</u>, November 3, 2015, page 6, Exhibit 3.



Federal and state funds are allocated to Local Early Steps programs based on the number of referrals received from the prior fiscal year. These funds are used for infrastructure and direct services. In accordance with the GAA, at least 85 percent of funds distributed to Local Early Steps programs are spent on direct services.

Program Performance

The Department is to address the performance standards in section 391.308(1), Florida Statutes and report actual performance compared to the standards for the prior fiscal year annually. Section 391.308(1), Florida Statutes, provides as follows:

- (1) PERFORMANCE STANDARDS.—The department shall ensure that the Early Steps Program complies with the following performance standards:
- (a) The program must provide services from referral through transition in a family-centered manner that recognizes and responds to unique circumstances and needs of infants and toddlers and their families as measured by a variety of qualitative data, including satisfaction surveys, interviews, focus groups and input from stakeholders.
- (b) The program must provide individualized family support plans that are understandable and usable by families, health care providers and payers and that identify the current level of functioning of the infant or toddler, family supports and resources, expected outcomes and specific early intervention services needed to achieve the expected outcomes, as measured by periodic system independent evaluation.
- (c) The program must help each family to use available resources in a way that maximizes the child's access to services necessary to achieve the outcomes of the individualized family support plan, as measured by family feedback and by independent assessments of services used by each child.
- (d) The program must offer families access to quality services that effectively enable infants and toddlers with developmental disabilities and developmental delays to achieve optimal functional levels as measured by an independent evaluation of outcome indicators in social or emotional skills, communication and adaptive behaviors.

The information in this report was obtained from a variety of qualitative and quantitative data sources, including information from the Early Steps data system, child record reviews, child



evaluation/assessment results, family surveys and stakeholder input. Future reports will include data from interviews and focus groups, which are being conducted during FY 2016-2017. Three years of data are included in order to provide a greater comparison of program performance as well as identify trends and opportunities for improvement. Pursuant to section 391.308(5), Florida Statutes, the following measures are to be included in this report:

- (a) Number and percentage of infants and toddlers served with an individualized family support plan;
- (b) Number and percentage of infants and toddlers demonstrating improved social or emotional skills after the program;
- (c) Number and percentage of infants and toddlers demonstrating improved use of knowledge and cognitive skills after the program;
- (d) Number and percentage of families reporting positive outcomes in their infant's and toddler's development as a result of early intervention services;
- (e) Progress toward meeting the goals of individualized family support plans; and
- (f) Any additional measures established by the department.

This report addresses performance standards and performance measures beginning FY 2013-2014 through FY 2015-2016. Performance standards and related performance measures are discussed together. The information included in the report serves as the foundation for the annual state plan required in section 391.308(2)(c), Florida Statutes, which will assess the need for early intervention services, evaluate the extent of the statewide need that is met by the program, identify barriers to fully meeting the need and recommend specific action steps to improve program performance.

Number of Children Served

Measure: Number and Percentage of Infants and Toddlers Served with an Individualized Family Support Plan

The number of infants and toddlers referred to the program for an evaluation has steadily increased over the past three years, based on an annual child count report from the Early Steps data system. During FY 2015-2016, 48,194 children were referred to the Early Steps Program. Of those children, 31,091 were eligible and received an IFSP. Figure 4 illustrates the total number of children who were referred, number of children determined eligible and received an IFSP and the percentage of children referred determined eligible.



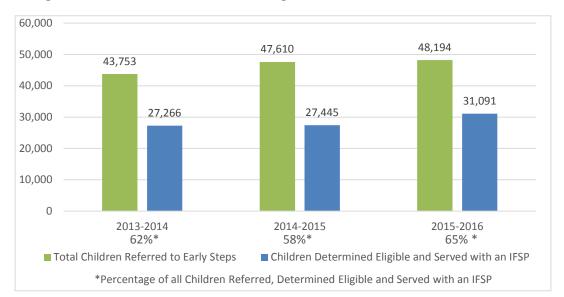


Figure 4. Total number of children referred, determined eligible and received an IFSP and the percentage of children referred determined eligible

There was a ten percent increase in the number of infants and toddlers referred from FY 2013-2014 through FY 2015-2016. Of the total number of children referred, 65 percent were determined eligible and served with an IFSP in FY 2015-2016. The increase in referrals may be attributed to the promotion of the developmental needs of infants and toddlers and the benefits of early intervention at the local and state levels. As a result of the increase in awareness, primary referral sources, including families, are referring more children to Early Steps.

After the program was renamed Early Steps in Florida law, the program identified opportunities to promote consistent messaging about the program. This resulted in a new logo and public awareness materials, developed in collaboration with stakeholders. Local Early Steps programs are continuing to partner with physicians, hospitals and birthing facilities to increase the visibility of the program.

Services From Referral Through Transition

Standard: The program must provide services from referral through transition in a family-centered manner that recognizes and responds to unique circumstances and needs of infants and toddlers and their families as measured by a variety of qualitative data, including satisfaction surveys, interviews, focus groups and input from stakeholders.

The measures below are federal reporting indicators that are monitored and reported to the U.S. DOE annually. These measures are intended to ensure infants and toddlers referred are

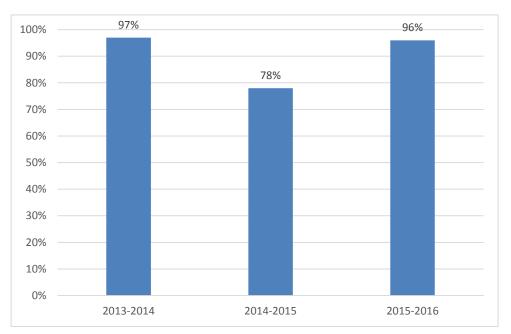


evaluated and provided with an IFSP within the federal timelines; services begin timely after the family consents via the IFSP; and transition activities are established to best support the child and family after exiting the program.

Evaluation and IFSP Timelines

In accordance with federal regulations, evaluations and IFSPs are required to be provided within 45 days of the date the child was referred to the Early Steps Program. Figure 5 depicts the percentage of infants and toddlers who received an evaluation and IFSP within the 45-day timeline.

Figure 5. Percentage of infants and toddlers who received an evaluation and IFSP within 45 days of referral



During FY 2015-2016, 96 percent of infants and toddlers received an evaluation and IFSP within 45 days of being referred. This percentage was parallel to the baseline reporting FY 2013-2014. The decline in FY 2014-2015 was due to staffing shortages at several Local Early Steps programs. The target for the 45-day timeline is 100 percent and is established by the U.S. DOE. The Early Steps Program has set a goal to increase performance by at least 2 percent per year over the next three years, until the target is reached.



Timely Services

Early Steps services are required to be provided within 30 days after family consent. This allows the service coordinator to identify the most appropriate provider to meet the child's needs at times convenient to the family and locations within the family's daily routines. Figure 6 illustrates the percentage of children who received services within 30 days of consent.

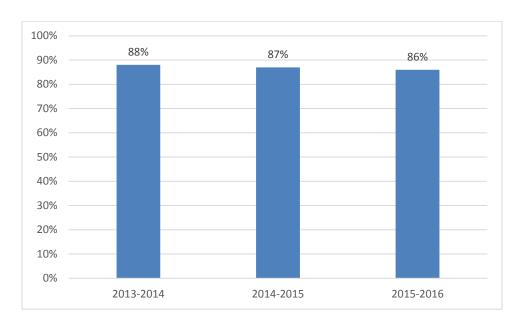


Figure 6. Percentage of infants and toddlers who received services within 30 days of consent

The target for the 30-day timeline is 100 percent and is established by the U.S. DOE. The Early Steps Program has set a goal to increase performance by at least 4 percent per year over the next three years, until the target is reached. There is a trend of a 1 percent decline in timely services since FY 2013-2014. The Early Steps Program is conducting a needs assessment, including a review of locations, provider types needed and opportunities for collaboration to address the need.

Transition

The Early Steps Program must ensure a smooth transition for infants and toddlers with disabilities under the age of three from early intervention services under Part C of the IDEA, to preschool or other appropriate services for toddlers with disabilities by 36 months of age. Not fewer than 90 days before the third birthday of a toddler served in Early Steps, the program is required to hold a conference to discuss services and develop a transition plan. The transition plan must include activities and timelines for successful transition from the Early Steps Program.



Figure 7 reflects the percentage of toddlers exiting the Early Steps Program with steps and services for transition planning at least 90 days before the third birthday.

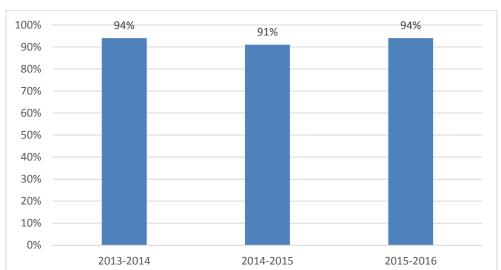


Figure 7. Percentage of toddlers exiting Early Steps with steps and services for transition planning at least 90 days before the third birthday

For children preparing to transition from Early Steps in FY 2015-2016, 94 percent received a timely transition conference with activities and timelines for the appropriate program(s) upon exit from the program. This is a 3 percent increase from the previous year and consistent with FY 2013-2014. The improved performance is attributed to ensuring adequate staffing in the Local Early Steps program, as previously described. This resulted in the adequate staff time necessary to conduct timely transition conferences in collaboration with local school districts. The target for the 90-day timeline is 100 percent and is established by the U.S. DOE. The Early Steps Program has set a goal to increase performance by at least 2 percent per year over the next three years, until the target is reached.

Family Outcomes

The Early Steps Program solicits feedback from families to assess family outcomes resulting from their child's participation in the program. These outcomes are identified by the U.S. DOE and reported annually. These data are derived from results from a nationally-developed family survey developed specifically for state's early intervention programs. Families report the extent the program helped their family effectively communicate their child's needs as outlined in Figure 8.



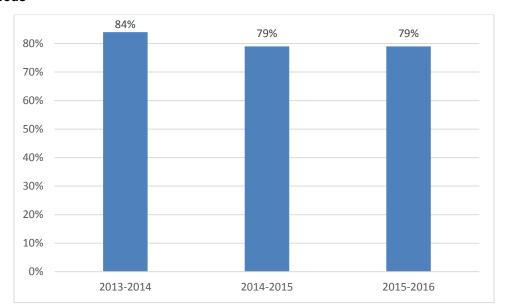


Figure 8. Percentage of families that report the program helped the family effectively communicate child's needs

During FY 2014-2015 and FY 2015-2016, 79 percent of families reported that early intervention services helped the family effectively communicate the child's needs. This is a Results Indicator and the target is established by the state. The target established for FY 2015-2016 was 73 percent. Although the target was surpassed, the program has identified opportunity to further educate families on the importance of open dialogue with the IFSP team that includes successes and challenges in meeting their child's developmental needs. The target for this measure will be reviewed and increased as appropriate, in collaboration with stakeholders, prior to submission of the 2017 annual performance report to U.S. DOE.

Individualized Family Support Plans

Standard: The program must provide individualized family support plans that are understandable and usable by families, health care providers and payers and that identify the current level of functioning of the infant or toddler, family supports and resources, expected outcomes and specific early intervention services needed to achieve the expected outcomes, as measured by periodic system independent evaluation.

Eligible infants and toddlers, and their families, are provided with an IFSP. The IFSP is a written plan that includes family concerns, the child's developmental status, strategies toward achieving outcomes and authorized services and supports. IFSPs are reviewed with the IFSP team,



including: the parents; other family members; advocates; persons outside the family, as requested by the parents; the service coordinator responsible for implementing the IFSP; persons directly involved in conducting the evaluation and/or assessment; and persons who are or will be providing early intervention services to the child or family. IFSPs are reviewed at least every six months, or more frequently if conditions warrant, or the family requests a review. The purpose of the reviews is to determine the progress toward achieving the outcomes and whether modifications are necessary to achieve results. Additionally, the IFSP is reviewed at least annually to re-determine eligibility and to revise, change, or modify provisions and assess the continued appropriateness of the outcomes, strategies and recommended services.

To address this standard and identify a mechanism to identify and report child progress, a group of Early Steps' stakeholders were convened to revise the IFSP. The revision of the IFSP included a needs assessment and review of other states' IFSPs. The goal is to have a document that is inclusive of federal and state requirements in a user-friendly format for families, providers and payers. The IFSP will include the current level of functioning of the infant or toddler, fields to track child progress, family supports and resources, expected outcomes and specific early intervention services needed to achieve the expected outcomes. The pilot implementation of the revised IFSP will begin no later than January 2017.

Measure: Progress toward meeting the goals of Individualized Family Support Plans

A random sample of child records were reviewed to determine progress toward meeting the goals on the IFSP. Based on the review, 97 percent of infants and toddlers served made progress toward meeting the outcomes on the IFSP during FY 2015-2016. This is a baseline year for data collection for this measure.

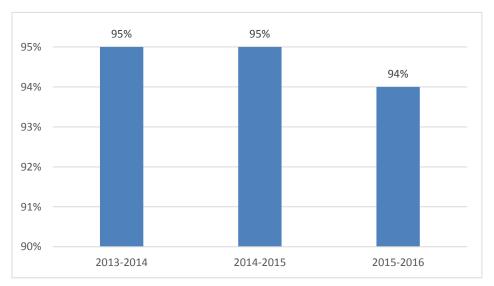
Families Reporting on Child's Outcomes

Standard: The program must help each family to use available resources in a way that maximizes the child's access to services necessary to achieve the outcomes of the individualized family support plan, as measured by family feedback and by independent assessments of services used by each child.

The IFSP team works with the family to identify available resources to meet the individualized outcomes. Figure 9 shows the percentage of families who indicated that the Early Steps Program helped use resources that achieved the desired outcomes on the IFSP.



Figure 9. Percentage of families who reported that Early Steps helped families use available resources in a way that maximizes the child's access to services necessary to achieve the goals of the Individualized Family Support Plan

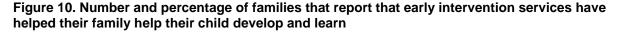


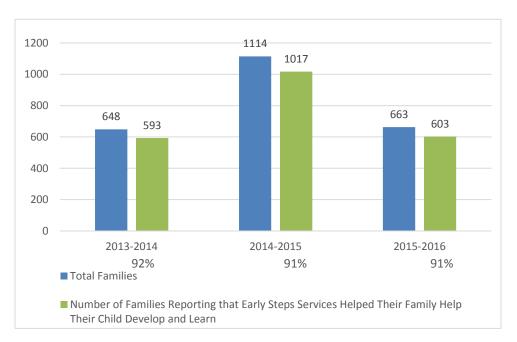
During FY 2015-2016, 94 percent of families reported that Early Steps helped them use available resources to ensure access to services. Although there was a decline of 1 percent in FY 2015-2016, the Early Steps Program maintained a high percentage of families who reported Early Steps helped families use available resources in a way that maximizes the child's access to services necessary to achieve the goals of the Individualized Family Support Plan. This is attributed to the partnerships established by Local Early Steps programs with community partners to ensure a seamless system of service delivery to maximize available resources for optimal outcomes for infants and toddlers and their families. At the state level, the Early Steps Program maintains collaborative partnerships with state agencies, universities and other programs that serve infants and toddlers, and their families.

Measure: Number and percentage of families reporting positive outcomes in their infant's and toddler's development as a result of early intervention services

The purpose of the Early Steps Program is to enhance not only the development of infants and toddlers with developmental delays or disabilities, but also the capacity of the family to meet the child's needs. Each Local Early Steps Program has a minimum of one full-time Family Resource Specialist (FRS). The FRS is a parent of a child who received early intervention services or would have been eligible for services. The primary role is to provide parent-to-parent support. Family Resource Specialists work with Local Early Steps programs to promote the importance of family education in service provision.

Families are surveyed annually to determine the extent to which Early Steps services have helped the child and family. Survey data are used to report family outcome measures determined by the U.S. DOE and identify priorities for program improvement. Figure 10 displays the percentage of families who report that Early Steps helped their family help their child develop and learn.





Based on FY 2015-2016 family survey results, 91 percent of families reported that Early Steps services positively impacted their ability to help their child develop and learn. The FY 2014-2015 national mean for this measure was 92 percent. During FY 2013-2014, the family survey process was conducted in a three month distribution period. A pilot for an ongoing distribution period for the family surveys was conducted during FY 2014-2015 resulting in an increase in the number of families surveyed. Due to feedback from stakeholders and resources, the process returned to a three month distribution period. The percentage of satisfaction did not vary as a result of the change in the survey distribution process.

Family Resource Specialists are required to develop and submit an annual System of Family Involvement Plan in collaboration with families served by the Early Steps Program. The plans



address strategies to increase family outcomes to build the capacity of families to help their children grow. Outcomes of the plans are provided to the Department as a contract requirement.

Child Outcomes

Standard: The program must offer families access to quality services that effectively enable infants and toddlers with developmental disabilities and developmental delays to achieve optimal functional levels as measured by an independent evaluation of outcome indicators in social or emotional skills, communication and adaptive behaviors.

Early Steps conducts an assessment on every child served using a tool called the Battelle Developmental Inventory, 2nd Edition (BDI-2). This tool assesses developmental domains that include social, communication, motor, cognitive/thinking and self-help skills. Children are assessed when entering the program and again when exiting the program to measure child progress. The data obtained on child progress are used to report on child outcomes determined by the U.S. DOE and identify priorities for program improvement.

Measure: Number and percentage of infants and toddlers demonstrating improved social or emotional skills after the program

The assessment for the social-emotional domain determines the percent of infants and toddlers with IFSPs demonstrating improved positive social-emotional skills. Social-emotional skills refer to the social relationships a child forms with others and how the child interacts with or relates to other children and adults. Figure 11 illustrates the number and percentage of infants and toddlers demonstrating improved social or emotional skills upon exiting the Early Steps Program.



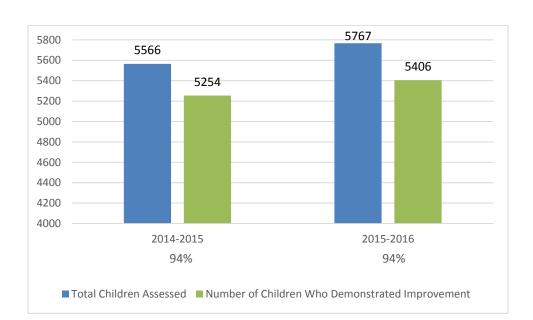


Figure 11. Number and percentage of infants and toddlers demonstrating improved social or emotional skills upon exiting Early Steps³

Data are unavailable for this measure for FY 2013-2014. During FY 2014-2015, 94 percent of infants and toddlers demonstrated improvement. Improvement in this developmental domain is attributed to the quality of the providers working with children resulting from the professional development and training for Early Steps' providers, the individualized approach for service delivery and the fluidity of the IFSP process which allows teams to reconvene any time a team member has concerns regarding the child's progress. It should be noted that the federal indicator for social-emotional outcomes measures "substantial" improvement; therefore, the results for this measure included in this report vary from what is federally reported.

In an effort to address areas of program improvement, the Early Steps Program is engaging in the implementation of the State Systemic Improvement Plan (SSIP). The focus for improvement is to increase the percent of infants and toddlers who exit early intervention with an increased rate of growth in positive social emotional skills. This area of focus was determined after an analysis of data from FY 2009-2010 through FY 2013-2014 found that "substantial" progress in the social-emotional domain for infants and toddlers served was significantly below the national average and more disparate than other child outcome areas. For FY 2015-2016, 29 percent of

³ Although the mechanism to obtain the data are the same, the measures required for federal reporting on child outcomes vary from the state measures for this report; therefore, the results are not the same.



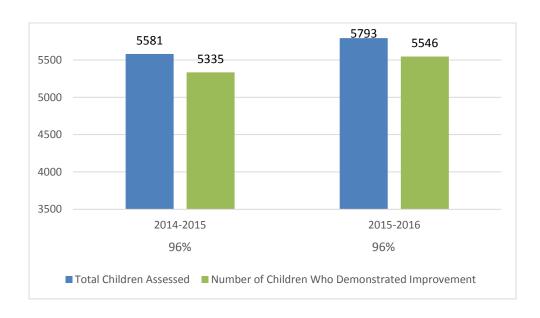
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infants and toddlers demonstrated "substantial" growth in the social emotional domain. The priority area was identified in collaboration with local and state stakeholders and resulted in a multi-year plan with measures and timelines to determine success. A workgroup of stakeholders has been established to act in an advisory capacity to the Early Steps Program. The workgroup includes state program administrators, technical assistance providers, university faculty, local program directors, a parent consultant and other experts with experience in early intervention. The workgroup provides data analysis and guidance related to implementation strategies for the SSIP.

Measure: Number and percentage of infants and toddlers demonstrating improved use of knowledge and cognitive skills after the program

The BDI-2 includes an assessment of cognitive skills, including communication. The assessment for cognitive skills determines the percentage of infants and toddlers with IFSPs demonstrating improvement. These skills include the acquisition and use of knowledge such as thinking, reasoning, problem-solving, expressive and receptive language. Figure 12 illustrates the number and percentage of infants and toddlers demonstrating improved acquisition and knowledge of skills upon exiting Early Steps.

Figure 12. Number and percentage of infants and toddlers demonstrating improved acquisition and knowledge of skills upon exiting Early Steps⁴



⁴ Although the mechanism to obtain the data are the same, the measures required for federal reporting on child outcomes vary from the state measures for this report; therefore, the results are not the same.

Florida HEALTH During FY 2014-2015 and FY 2015-2016, 96 percent of infants and toddlers demonstrated improvement in the acquisition and knowledge of skills domain. Data are not available for this measure for 2013-2014. Improvement in this developmental domain is attributed to the quality of the providers working with children resulting from the professional development and training for Early Steps' providers, the individualized approach for service delivery and the fluidity of the IFSP process which allows teams to reconvene any time a team member has concerns regarding the child's progress. It should be noted that the federal indicator for cognitive skills measures "substantial" improvement; therefore, the results for this measure included in this report vary from what is federally reported. Due to Early Steps' current eligibility criteria, children who have the most severe disabilities were served in the program. While these children may not make "significant" improvement, the data shows that even these children have made developmental progress while receiving Early Steps services.

The infrastructure for implementation of the SSIP to improve social-emotional outcomes for infants and toddlers includes training, mentoring, coaching and ongoing evaluation with a focus on collaboration for utilization of resources and shared missions. The implementation of phase three of the SSIP has just begun. Efforts are underway to build the foundation needed to ensure evidence-based practices across the state, as well as, a process for data collection, analysis and reporting. The results of this effort are expected to have a positive impact on all child and family outcomes, in addition to the social-emotional developmental domain.

Conclusion

The services provided under the Early Steps Program are intended to enhance the cognitive, social, emotional and physical development of infants and toddlers. Well-implemented, high-quality early intervention programs not only help children in the short term, but also help children lead more productive lives through higher earnings, less criminal behavior and improved health in the long term.

The Early Steps Program is serving more children across Florida as demonstrated by the increased number of children referred to the program and subsequently receiving services between FY 2013-2014 and FY 2015-2016. Of the 48,194 children who were referred to Early Steps, 31,091 children received early intervention services. Increases in funding at the state and federal level have assisted the Department with providing more direct services to children and families.



The Early Steps Program increased the number of children evaluated and receiving an IFSP within 45 days from 78 percent to 96 percent between FY 2014-2015 and FY 2015-2016. Service satisfaction is high as measured by the percentage of families reporting positive outcomes as a result of early intervention services (91%) and the percentage of families who reported the program helped obtain services which the child and family needed (94%).

The Early Steps program will continue to involve stakeholders at the state and local level to review and analyze data in order to improve performance in areas below the targets and improve outcomes for infants and toddlers and their families. Through a comprehensive state planning process, the program will assess statewide need, evaluate the extent of the need that is met by the program, identify barriers to meeting the need and develop action steps with timelines to improve performance. In an effort to continually address and improve overall program efficiency and services to infants and toddlers, the Department and the Local Early Steps programs are engaging in the following strategies:

- Revising the IFSP to include federal and state requirements in a user-friendly format for families, providers and payers;
- Increasing public awareness; and
- Implementation of the SSIP.

The Early Steps Program is critical to ensuring that children with unique abilities develop to their greatest potential.

